

TENNESSEE DEPARTMENT OF EDUCATION
EDUCATION OF HOMELESS CHILDREN AND YOUTH
EVALUATION REPORT

CONTACT INFORMATION AND CERTIFICATION

SCHOOL YEAR 2002-2003		
Name of School District		
Person to be Contacted About This Report		Title
Telephone Number	Fax Number	E-mail
<i>Certification</i> <i>This Report Contains the Most Accurate Data Available to the School District</i>		
Signature of the Superintendent		Date
Signature of the Homeless Liaison/Coordinator		Date

PART I: STATISTICAL DATA

A. Estimated Number of Homeless Children and Youth:

(1) Provide the estimated number of homeless children in your school district according to school level.

School Level	Number of Homeless Children and Youth	Number of Homeless Children/Youth Enrolled in Public School	Number of Homeless Children/Youth Regularly Attending School
K-5			
6-8			
9-12			
Total			

(2) Provide the estimated number of homeless preschool-age children (from birth through pre-k) in your school district.

Number of Homeless Preschool Children	Number of Homeless Preschool Children Enrolled in Preschool Programs

B. Primary Nighttime Residence of Homeless Children and Youth

Of the total number of homeless children and youth, including preschoolers, provide the estimated number of students who have the following as their nighttime residence. In instances where there was more than one location, choose the location of highest frequency (do not duplicate estimates).

Primary Nighttime Residence	Estimated Number of Homeless Children/Youth
Shelters	
Doubled-up	
Unsheltered (e.g., campgrounds, cars, parks, etc.)	
Other (specify)	
Unknown	

C. Barriers to School Attendance/Enrollment of Homeless Children and Youth

- (1) From the list below, rank in order the most frequently identified barriers to school enrollment or attendance. Number one (1) indicates the most frequently identified barrier and number nine (9), the least frequently identified. Use each number only once. Use "N/A" to indicate that the item is not a barrier.

Attendance/ Enrollment Barriers	Numeric Ranking 1-9
Residency Requirements	
Availability of School Records	
Birth Certificates	
Legal Guardianship Requirements	
Transportation	
Lack of Available Preschool Programs	
Immunization Requirements	
Physical Examination Records	
Other (specify)	

- (2) Describe briefly the local policies, or steps, that have taken to eliminate attendance and enrollment barriers.

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D. Unique Needs of Homeless Children and Youth

- (1) Place a check mark (✓) in the appropriate box to indicate the extent to which the following educational and school-related activities are needed to ensure the individual success of homeless children and youth.

Educational and School-related Activities	A Major Need	A Minor Need	Not an Identified Need
Tutoring/remedial			
Special Education			
English as a Second Language			
Counseling			
Transportation			
Free Lunch/Breakfast			
Medical Services			
School Supplies			
Preschool Programs			
Staff Development on Homeless Issues			
Parent Training/Involvement			
Agency Coordination			
Policy Revision to Facilitate Enrollment			
Case Management			
Enrollment			
Records Transfer			
Other (please specify)			

- (2) Indicate by check marks (✓) which, if any, of the following programs homeless children and youth, including preschoolers, have difficulty accessing.

Federal Programs	(✓)	Describe briefly why there is a problem gaining access.
Title I		
Head Start		
Even Start		
Special Education		
Bilingual Education		
Adult and Vocational Education		
Safe and Drug Free Schools		
Other Federal Programs (specify) _____		

E. Activities Provided

Indicate the number of students/staff served and the number of days services were provided for the activities listed below.

Activity	Number of Students Served	Number of Staff Members Served	Number of Days Services are Provided
Educational Services			
Professional Development			
Coordination of Services			
Comprehensive Services			
Transportation			
School Records			
School Supplies			
Extraordinary or Emergency Services			

PART II: PROGRESS

State each program goal and the progress made toward meeting the goal.

Goal	Progress

No later than 30 days after the project end date, this report must be submitted to:

**Lesley Isabel, Project Director
Homeless Education
Tennessee Department of Education
5th Floor-Andrew Johnson Tower
710 James Robertson Parkway
Nashville, TN 37243-0379
Lesley.Isabel@state.tn.us**

Note: Final reimbursement may not be processed until this report has been submitted.